

# Introduction

- This study explores the journey of obtaining diagnoses and ongoing care for Rheumatoid Arthritis (RA), focusing on patient perspectives, particularly among recently diagnosed individuals.
- The timeline for diagnosis among 33 interviewees ranges from less than a month to over 15 years. Participants highlight the crucial role of Family Physicians (FPs) in RA care, including referral support, symptom management, addressing drug side effects, managing comorbidities, and reproductive health considerations post-specialist attachment.
- Despite their importance, FPs encounter diagnostic challenges, referral barriers, and limited engagement with specialists, indicating the need to address these gaps in RA care access.

# Methodology

- Recruitment sources:**
  - Arthritis Research Canada's volunteer noticeboard and Facebook groups of ARC affiliates (n=21)
  - Clinics affiliated with the Canadian Primary Care Sentinel Surveillance Network (CPCSSN) (n=12)
- Ethical clearance:**
  - Obtained from multiple universities
- Interview process:**
  - Semi-structured interview guide developed with input from a national advisory committee of people living with RA
  - Piloted for refinement
  - Interviews conducted via Zoom
  - Duration: 1-2 hours each
  - Recorded and transcribed
- Coding process:**
  - NVivo14<sup>®</sup> software used for transcription and coding
  - Analysis employed deductive coding informed by the Candidacy Framework and inductive coding derived from the interviews.

# Interviewee characteristics

33 interviews (8 Dec 2021 – 25 Nov 2023)  
• 31 in English, 2 in French

Pan-Canadian: 12 AB, 6 BC, 5 MB, 1 NF, 7 ON, 2 QC

**Ethnic/religious affiliation:**

- None (n=22);
- Catholic, Dutch, Quebecoise, German Mennonite, S. Asian (Islamic/Sikh), Scottish, part-Aboriginal, Chinese-Canadian (n=11);
- most indicated limited significance to RA experience.

**Gender/sex:** 30 female, 3 male  
• previous same-sex partners (n=2)

**Age range:** 21-76  
• ~30%: 30-39; ~ 20%: 50-59, 60-69; 15%: 40-49, 70-79; 3%: 20-29

**Education:**

- High school or less (n=3);
- some postsecondary (n=18);
- undergraduate degree (n=6);
- graduate/professional degree (n=6)

**Current economic status (self-reported):**

- 'comfortable' (n=26); 'struggling' (n=7)

**Social networks:**

- extensive/solid/diverse (n=25); limited (n=8)

**Community size & nature:**

- Large-medium city/suburb (n=28)
- small rural/remot (n=5)

**Travel time to FP/rheumatologist (greatest):**

- 30 mins or less (n=23)
- 30+ mins-1 hour (n=6)
- more than 2 hours (n=4)

**Time since diagnosis with RA:**

- less than 5 years (n=25)
- 6-14 years (n=5)
- more than 15 years (n=3)

**Time to secure a diagnosis:**

- less than 1 year (n=16)
- 1-2 years (n=6)
- more than 3 years (n=11)

# Reference

Dixon-Woods M, Cavers D, Agarwal MS, et al. Conducting a critical interpretive synthesis of the literature on access to healthcare by vulnerable groups. BMC Medical Research Methodology. 2006;6(35). doi:10.1186/1471-2288-6-35

# Accessing Care for Rheumatoid Arthritis: The Role of Family Physicians

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